

CENTRAL INTAKE

Process Description

Prepared by: DCS Office of Information Systems



Central Intake

Process Description Document

Prepared by:

**Department of Children's Services
Office of Information Systems**

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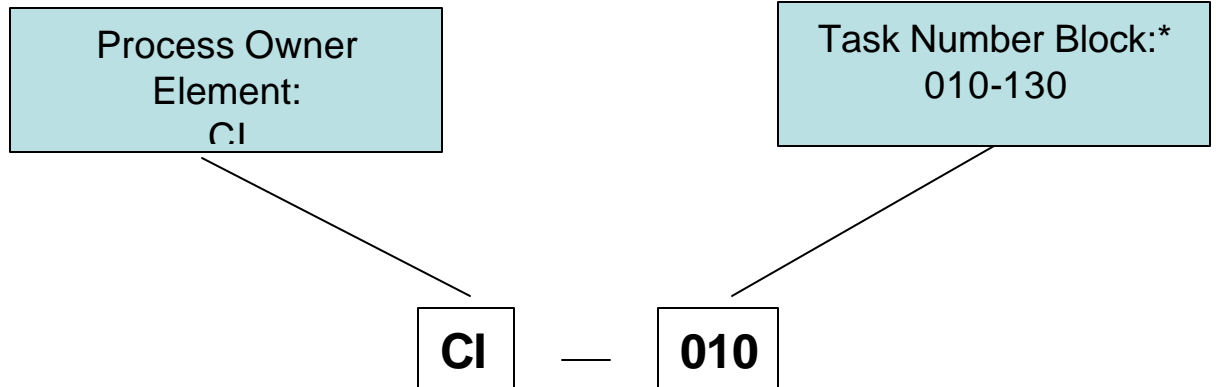
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Process Element Definitions

Task: A unit of work to be completed that is part of the overall process.

Task naming convention:



Task Owner: Indicates the person/group that is responsible for performing the task.

Participants: Individuals and organizations that are actively involved in the process/task, or whose interests may be positively or negatively affected as a result of process execution or process completion.

Inputs: Entry information used specifically to assist in accomplishing the task for which it is aligned. The same input might be applied to multiple tasks.

Performance Steps: The series of steps necessary to accomplish the given task in such manner that it meets the performance metric provided.

Outputs/Deliverables: The deliverables produced from performing the given task using the input information, standard and performance steps to accomplish the outcome. An output might feed several inputs.

**Note – Initial process flows should increment the numbering between steps by 10s. This will allow for additional steps to be inserted in the future without affecting the entire process narrative and flow.*

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Process Description

Process Name: Central Intake

Process Manager: Shalonda Cawthon

Process Description: The Department of Children's Services (DCS) shall receive reports alleging child abuse or neglect to protect the safety of children, to ensure the confidentiality of persons who report abuse or neglect, and to gather sufficient information to determine whether children may be at risk of abuse or neglect.

Interfaces w/ other processes: MRS/SIU Investigation and MRS Assessment Process

Process Participants: Intake Specialist
Shift Supervisor
CPS Team Leader
SIU Team Leader
Assessment Team Leader
County Resource Specialist

Associated Documentation:

CS-0680 – CPS Intake
Central Intake Cue Questions
SDM Response Priority
SDM Screening Tool (TBD)

Supporting Policy:

House Bill No. 447 - "Multi-level Response System for Children and Families"
DCS Policy 14.2 – Child Protective Services Intake Decisions
DCS Policy 14.3 – Screening, Assignment and Response Priority
DCS Policy ## - Child Protective Services Assessment (DRAFT)
DCS Policy ## - MRS/Family Services Worker (DRAFT)

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Task (CI-010): Reporter contacts Central Intake Hotline

Task Owner: Reporter

Participants: Reporter, Central Intake Specialist

Inputs: A person (Reporter) with a possible report of child abuse/neglect phones the Central Intake Hotline to report, or forwards a referral via other available means (fax, mail, email, Internet, etc.)

Performance Steps:

1. Referral contact is made to Central Intake Hotline. Central Intake Hotline is open to receive calls 24 hours a day, 7 days a week.
2. Special phone numbers are distributed to medical, law enforcement, juvenile court and other professionals so that calls from those persons are bumped to the top of the queue for immediate answer by Intake Specialists. A separate unit is set up at Central Intake to handle these calls.
3. Professional Reporters may also complete a referral via Internet access and submit the referral directly to Central Intake for screening.
4. Referrals are also accepted via fax, email, and regular mail.

Outputs/Deliverables:

- Reporter contacts Central Intake with possible report of child abuse or neglect.

Task (CI-020): Intake Specialist gathers initial referral information.

Task Owner: Intake Specialist

Participants: Intake Specialist, Reporter

Inputs: A person (Reporter) with a possible report of child abuse/neglect contacts Central Intake.

Performance Steps:

Reporter Contact by phone:

1. Intake Specialist answers call and identifies self and agency.
2. Intake Specialist inquires about the nature or purpose of the Reporter's call.
3. Using standard cue questions and intake format, Intake Specialist gathers enough information to determine whether the call is a report of abuse or neglect and records the information in the system.
4. Determines location and current condition of child.

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Reporter Contact by Internet Referral

5. If referral is submitted via Internet interface, Intake Specialist will review the referral information and proceed with screening process.

Reporter Contact by mail, fax, email

6. If referral is submitted by mail, fax, email, Intake Specialist will create an intake record in the system using the information included in the correspondence and proceed with screening process.
7. If there is not enough information in the correspondence to create an intake, Intake Specialist will attempt to contact the reporter if contact information is available.

Outputs/Deliverables:

- Initial information gathered.
 - Intake created in system.
-

Task (CI-030): Intake Specialist determines if call is a report of abuse or neglect.

Task Owner: Intake Specialist

Participants: Intake Specialist, Shift Supervisor

Inputs: Initial intake information

Performance Metric: Determination is made as to whether the referral is a report of child abuse or neglect.

Performance Steps:

1. Based upon initial intake information, Intake Specialist makes a determination (*see DCS Policy 14.02*) as to whether the reported information supports a valid report of child abuse or neglect, Resource Linkage or No Services Need call.
2. If the referral meets the criteria for Investigation or Assessment go to Task 040
3. If the referral determination is Resource Linkage:
 - a. Intake Specialist provides Reporter with information needed or requested.
 - b. If the 211 system is functional and stable statewide, the Intake Specialist may refer the caller to 211 for assistance.
 - c. Intake Specialist will provide the name and number of the appropriate contact person for the region (county) to the caller if determined that the call meets criteria for Resource Linkage.
 - d. Intake Specialist documents call and information provided.
 - e. Intake Specialist submits referral to Shift Supervisor with determination of Resource Linkage. Go to Task 070
4. If the referral determination is No Services Needed:
 - a. Intake Specialist documents nature of call.

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- b. Intake Specialist documents call and information provided.
- c. Intake Specialist submits referral to Shift Supervisor with determination of No Services Needed. Go to Task 070

Outputs/Deliverables:

- Intake Specialist makes screening decision.
 - Resource Linkage or No Services Needed submitted to Shift Supervisor.
-

Task (CI-040): Intake Specialist completes referral information based on cue questions

Task Owner: Intake Specialist

Participants: Intake Specialist, Reporter, Shift Supervisor

Inputs: Intake Specialist has determines the referral meets the criteria for Investigation or Assessment.

Performance Steps:

1. Using DCS Policy 14.02 guidelines and standard cue questions, Intake Specialist guides the conversation with the Reporter to gather as much detailed information about the child, the possible abuse/neglect situation and any family information that may be pertinent to the child's situation.
 2. Reporter provides Intake Specialist with information from which Intake Specialist makes an initial determination whether the child is at risk of immediate harm.
 3. If Intake Specialist determines that child may be at risk of immediate harm, Intake Specialist alerts Central Intake Shift Supervisor for intervention after completing information from the Reporter.
 4. Shift Supervisor may review intake information documented thus far, discuss the information with Intake Specialist to determine what immediate course(s) of action are appropriate.
 5. Shift Supervisor determines appropriate immediate response action. Depending on the nature of the situation, Shift Supervisor may determine that law enforcement should be notified of the referral/allegations immediately.
 6. Shift Supervisor initiates immediate response action. (If appropriate)
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Outputs/Deliverables:

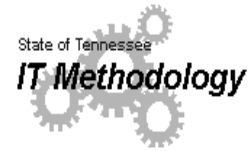
- Completion of information gathering from Reporter.
- Documentation, in system, of information gathered from Reporter
- Immediate response action determined and initiated, if appropriate
- Begin/update Comprehensive Assessment **

****Note:** Information gathered at referral shall begin the comprehensive Assessment process; for referrals on families already active in the system with a comprehensive Assessment, new referral information shall be derived and displayed in the comprehensive Assessment. Details regarding the

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specific referral information to be included on the comprehensive Assessment will be determined during requirements analysis phase.

Task (CI-050): Intake Specialist searches for previous history on child/family

Task Owner: Intake Specialist

Participants: Intake Specialist

Inputs: Intake Specialist has completed information gathering from reporter and documented the information in the system.

Performance Steps:

1. Intake Specialist searches system for previous history for child and any other person reportedly involved in the incident of child abuse/neglect. ****Note:** The system will need to provide an expedient but thorough search functionality in order to allow Intake Specialists to quickly process calls. Current system takes too long and therefore business has had to adjust to only searching history for referrals where child is age four or under and abbreviated histories on other referrals where response priority is not a P1.
 2. Intake Specialist adds any positive search results related to child/family to the intake form as supporting information for the screening decision. ****Note:** New system should provide a means of automatically adding client/person history to the referral. Details as to the specific elements to be derived and displayed will be identified during Requirements Analysis for Central Intake.
-

Outputs/Deliverables:

- Intake information is completed with Reporter information and previous history information for child/family, if any.
-

Task (CI-060): Intake Specialist makes Multiple Response Decision and assigns a Response Priority for the referral

Task Owner: Intake Specialist

Participants: Intake Specialist, Shift Supervisor

Inputs: Intake information has been completed and family service history with DCS, if any, collected from system and added to intake.

Performance Steps:

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1. Intake Specialist uses screening tool to support decision to either categorize the referral as a traditional MRS/SIU Investigation or as an MRS Assessment.
2. Using the SDM Response Priority tool and DCS Policy 14.3, Intake Specialist will assign a Response Priority to the referral.
3. Intake Specialist will then forward the referral to the Shift Supervisor for review.

Outputs/Deliverables:

- Intake information is completed with Reporter information and previous history information for child/family, if any.
- Intake Specialist submits referral to Shift Supervisor

****NOTE: As of 12/12/2005, no specific screening tool has been identified for use in this process, though the Department is currently reviewing several different ones. Plans are to include an automated screening and response priority tool in the new system.**

Task (CI-070): Shift Supervisor reviews/approves Multiple Response Decision & Response Priority

Task Owner: Shift Supervisor

Participants: Shift Supervisor

Inputs: Intake with screening decision and response priority submitted to Shift Supervisor.

Performance Steps:

1. Shift Supervisor reviews referral information as recorded by the Intake Specialist.
2. Shift Supervisor ensures that screening and response priority tool used correctly by Intake Specialist, based on the information provided by the Reporter.
3. Shift Supervisor approves the screening decision.
 - a. If approved, Shift Supervisor will then forward the referral to the appropriate county for assignment to Investigation or Assessment. Go to Task 080
 - b. If approved, Shift Supervisor referral for Resource Linkage the referral is forwarded to the County Resource Specialist. Go to Task 071
 - c. If approved for No Services Needed the Shift Supervisor will close the referral and Central Intake Process Ends.
4. Shift Supervisor may override the screening decision and/or response priority assigned by the Intake Specialist. Shift Supervisor must justify the override. Override may involve changing the response priority, changing the multiple response decision, or both. Once Shift Supervisor has made the necessary overrides/justifications, the approved referral is sent on the county for assignment or Resource Linkage.
5. Shift Supervisor may send back to the Intake Specialist for more information.

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****Note:** Once the referral is forwarded to the county for assignment, responsibility for the referral must be noted in the system. The Team Leader 'on-call' or 'assignment schedule' must be set up to ensure that the referral is assigned to an actual person and not a general holding pool for referrals.

Outputs/Deliverables:

- Approved multiple response and response priority decisions
 - Override if screening decisions with justification (if appropriate)
 - Send sent back to Intake Specialist for more information (if appropriate)
 - Forwarded to county for assignment
-

Task (CI-071): Resource Linkage

Task Owner: County Resource Specialist

Participants: Shift Supervisor, County Resource Specialist

Inputs: Shift Supervisor has submitted referral to County Resource Specialist for follow up.

Performance Steps:

1. County Resource Specialist will follow up with the Reporter.
2. County Resource Specialist will make referrals to other agencies
3. County Resource Specialist will document the contacts and close the referral.

Note: Each region will be responsible for providing Central Intake with an updated list of County Resource Specialist for that region (county).

Outputs/Deliverables:

- Information provided to Reporter.
 - Documentation of Resource Linkage call.
 - Central Intake Process ends
-

Task (CI-072): No Services Needed

Task Owner: Shift Supervisor

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Participants: Shift Supervisor

Inputs: Intake Specialist determines call is not a report of child abuse/neglect and no services are needed.

Performance Steps:

1. Shift Supervisor approves No Services Needed determination and closes referral.

Outputs/Deliverables:

- Referral Closed
 - Central Intake Process ends.
-

Task (CI-080): Shift Supervisor forwards referral to Team Leader in county

Task Owner: Shift Supervisor

Participants: Shift Supervisor, Investigation Team Leader, Assessment Team Leader in county

Inputs: Shift Supervisor has approved screening decision of Investigation or Assessment.

Performance Steps:

1. Shift Supervisor forwards intake to pre-determined Team Leader in appropriate county.

Outputs/Deliverables:

- Referral for Investigation or Assessment is forwarded to Team Leader in county for assignment.
-

Task (CI-090): Team Leader accepts for Investigation or Assessment?

Task Owner: Team Leader in county

Participants: Team Leader in county

Inputs: Shift Supervisor has forwarded referral to appropriate Team Leader in county for assignment to Investigation or Assessment.

Performance Steps:

1. Team Leader reviews referral for investigation or assessment.

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2. If the Team Leader does not agree they can:
 - a. Request reconsideration of Response Priority from Central Intake. Central Intake Shift Supervisor may (or may not) adjust the assigned Response Priority of the referral.
 - b. Referrals assigned to Investigation or Assessment can be reconsidered for purposes of changing the multi-response decision type (Investigation or Assessment).
 - c. Resubmits intake with request for reconsideration back to CI Shift Supervisor.
 - d. Team Leader is still responsible for the referral and the original response priorities remain the same.
3. If the Team Leader agrees then go to Task 120 (MRS Investigation) or Task 130 (MRS Assessment) depending on the referral type.
4. Once the referral has been accepted in the county for investigation or for assessment, then Central Intake's involvement with the specific referral ends.

Outputs/Deliverables:

- Request for Reconsideration of response priority, OR
- Open Investigation or Assessment.

Task (CI-100): Central Intake Reconsideration

Task Owner: Central Intake Shift Supervisor

Participants: Central Intake Shift Supervisor, Team Leader

Inputs: Team Leader has reviewed the referral and has determined that the Screening Decision / Response Priority is not appropriate or that the referral itself does not contain information that meets the referral type criteria.

Performance Metric: Return for reconsideration should be done immediately upon completion of the review of the referral if Team Leader determines that referral is not appropriate.

Performance Steps:

1. Team Leader forwards referral back to Central Intake Shift Supervisor with request for reconsideration and information to support the request for reconsideration of the referral.
2. Shift Supervisor receives and reviews request for reconsideration of referral screening.
3. Shift Supervisor makes a decision regarding the request for reconsideration

Outputs/Deliverables:

- Reconsideration of referral

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Task (CI-110): Submit to the Team Leader for Investigation/Assessment?

Task Owner: Shift Supervisor

Participants: Shift Supervisor

Inputs: Team Leader in county disagrees with Screening Decision from CI and resubmits intake with reconsideration request back to Shift Supervisor.

Performance Metric: Reconsideration by Central Intake should take place within 10 minutes of the receipt of the request for reconsideration.

Performance Steps:

1. If Shift Supervisor denies the request for reconsideration, the intake is re-submitted back to the responsible team leader in the county with its original screening decision.
 - a. Team Leader can only submit referral for reconsideration one time.
2. If Shift Supervisor agrees to reconsider:
 - a. Response priority could be changed
 - b. Referral once categorized as investigation or assessment referral type may be changed.
 - c. Referral may be changed to Resource Linkage and sent to the County Resource Specialist. Return to Task 071
 - d. Referral may be changed to No Services Needed. Return to Task 072

Outputs/Deliverables:

- Shift Supervisor accepts/denies reconsideration of referral.
 - Possible change in response priority, screening decision, or referral type.
-

Task (CI-120): MRS/SIU Investigation Process

Task Owner: SIU or MRS Team Leader

Participants: SIU or MRS Team Leader, Investigation Worker

Inputs: Referral has been accepted for Investigation.

Performance Steps:

1. Team Leader assigns Investigation to Investigation Worker.
 2. Refer to MRS/SIU Investigation process map and documentation.
-

Outputs/Deliverables:

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- No further involvement from Central Intake required.
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Task (CI-130): MRS Assessment

Task Owner: Assessment Team Leader

Participants: Assessment Team Leader, Assessment Worker

Inputs: Assessment Team Leader accepts referral for Assessment.

Performance Steps:

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1. Team Leader assigns Assessment to Assessment Worker.
 2. Refer to MRS Assessment process map and documentation.
-

Outputs/Deliverables:

-
- Open Assessment case
-
-

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Stakeholder Sign-Offs

Shalonda Cawthon, Executive Director, Office of Child Safety	Date
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Debbie Waddell, Director, Prevention and Preservation	Date
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Suzanne Ford, Director, Central Intake	Date
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